▶ NOTE: ALL APPLICANTS MUST LIVE WITHIN THE CITY LIMITS! ◀

CITY OF FLAGSTAFF APPLICATION TO SERVE ON A BOARD/COMMISSION

PLEASE TYPE OR PRINT IN BLACK INK APPLICATIONS WILL BE KEPT ON FILE FOR ONE YEA	ΔRI	DATE:		
THE PERSON OF TH	<u></u>			
NAME:		HOME PHONE:		
HOME ADDRESS:		Z	(IP:	
EMPLOYER:		JOB TITLE:		
BUSINESS ADDRESS:	7IP:	BUS. PHONE:		
PLEASE INDICATE PREFERRED MAILING/D				
BOARD/COMMISSION YOU WISH TO SERV	<u>E ON</u> :			
BACKGROUND INFORMATION: (F	Please attach a resume'	or statement describin	a vour experience	
community activities, and other relevant applicable to this Board or Commission.)				
			_	
Why do you want to serve on the Board or C	Commission you listed? (At	tach additional page if ne	eded.)	
			_	

RETURN TO: CITY CLERK'S OFFICE, 211 WEST ASPEN AVENUE, FLAGSTAFF, AZ 86001

THE CITY COUNCIL PREFERS TO CONSIDER APPOINTMENTS TO BOARDS AND COMMISSIONS IN EXECUTIVE SESSIONS, WHICH ARE CLOSED TO THE PUBLIC, AND THEN MAKE THE APPOINTMENTS IN A PUBLIC MEETING. YOU HAVE THE RIGHT, HOWEVER, TO HAVE YOUR APPLICATION CONSIDERED IN AN OPEN MEETING. IF YOU DESIRE TO HAVE YOUR APPLICATION CONSIDERED OR DISCUSSED IN A PUBLIC MEETING, PLEASE ATTACH A LETTER MAKING SUCH A REQUEST.